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**RECEIVED  
CENTRAL FAX CENTER**

**MAR 25 2005**

## FACSIMILE TRANSMITTAL SHEET

**DATE:** March 25, 2005

**TO:** Examiner: Hashem, Lisa Group Art Unit: 2645

**COMPANY:** United States Patent and Trademark Office

**FACSIMILE NO:** 703-872-9306

**FROM:** H. Artoush Ohanian, Reg. No. 46,022

**RE:** Response to Notice of Non-Compliant Amendment dated March 10, 2005; Title: "Intermediary Device Based Callee Identification" Atty. Docket No.: AUS920010822US1 (10128)

**SERIAL NO.:** 10/015,282

**NUMBER OF PAGES:** (Including Cover) 5

**COMMENTS:** Please see attached.

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Catherine Berglund  
Catherine Berglund  
March 25, 2005  
Date


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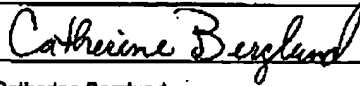
PTO/SB/21 (09-04)

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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/015,282	<b>RECEIVED</b> <b>CENTRAL FAX CENTER</b> <b>MAR 25 2005</b>
	Filing Date	12/02/2001	
	First Named Inventor	Michael Wayne Brown	
	Art Unit	2645	
	Examiner Name	Heshem, Lisa	
Total Number of Pages in This Submission	5	Attorney Docket Number	AUS820010822US1

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Facsimile Cover Sheet
Remarks The Commissioner is hereby authorized to charge or credit Deposit Account No. 09-0447 for any fees required or overpaid.		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	BIGGERS & OHANIAN, LLP	
Signature		
Printed name	H. Artoush Ohanian	
Date	03/25/05	Reg. No. 42,022

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Signature		
Typed or printed name	Catherine Berglund	Date 03/25/05

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## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

**RECEIVED  
CENTRAL FAX CENTER**

MAR 25 2005

In re Application of:  
Michael Wayne Brown, *et al.*

Serial No.: 10/015,282

Filed: December 12, 2001

Title: Intermediary Device Based Callee  
Identification§  
§ Group Art Unit: 2645  
§  
§ Examiner: Hashem, Lisa  
§  
§ Atty Docket No.: AUS920010822US1  
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§Mail Stop: Amendment  
Commissioner for Patents  
P.O. Box 1450  
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Commissioner for Patents, Washington, DC 20231 on this date:

March 25, 2005

Date

Catherine Berglund  
Catherine Berglund**RESPONSE TO NOTICE OF NON-COMPLIANT AMENDMENT  
DATED MARCH 10, 2005**

Dear Sir:

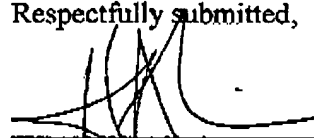
This is a Response to the Notice of Non-Compliant Amendment (37 CFR 1.121) dated March 10, 2005. Applicants inadvertently included the sentence "Please cancel claims 1-16 and 32-59" in the "Response to Restriction Requirement of December 2, 2004," dated December 17, 2004. In response to the Notice of Non-Compliant Amendment dated March 10, 2005, Applicants submit the attached Corrected Response to Restriction Requirement of December 2, 2004.

The Commissioner is hereby authorized to charge or credit Deposit Account No. 09-0447 for any fees required or overpaid.

Respectfully submitted,

Date: March 25, 2005

By:



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ATTORNEY FOR APPLICANTS

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Title: Intermediary Device Based Callee  
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Group Art Unit: 2645

Examiner: Hashem, Lisa

Atty Docket No.: AUS920010822US1

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*March 25, 2005*  
Date

*Catherine Berglund*  
Catherine Berglund

**CORRECTED RESPONSE TO RESTRICTION REQUIREMENT  
OF DECEMBER 2, 2004**

Dear Sir:

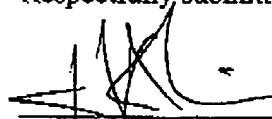
The Office Action of December 2, 2004, identifies three groups of claims and requires Applicants to elect one of the following groups of claims: group I including claims 1-16; group II including claims 17-31; and group III including claims 32-59. Applicants elect Group II including claims 17-31 for prosecution in the present case.

The Commissioner is hereby authorized to charge or credit Deposit Account No. 09-0447 for any fees required or overpaid.

Respectfully submitted,

Date: March 25, 2005

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